

Resilience after Hurricane Katrina among pregnant and postpartum women

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Abstract:

BACKGROUND: Although disaster causes distress, many disaster victims do not develop long-term psychopathology. Others report benefits after traumatic experiences (posttraumatic growth). The objective of this study was to examine demographic and hurricane-related predictors of resilience and posttraumatic growth. METHODS: We interviewed 222 pregnant southern Louisiana women and 292 postpartum women completed interviews at delivery and 8 weeks later. Resilience was measured by scores lower than a nonaffected population, using the Edinburgh Depression Scale and the Post-Traumatic Stress Checklist. Posttraumatic growth was measured by questions about perceived benefits of the storm. Women were asked about their experience of the hurricane, addressing danger, illness/injury, and damage. Chi-square tests and log-Poisson models were used to calculate associations and relative risks for demographics, hurricane experience, and mental health resilience and perceived benefit. FINDINGS: Thirty-five percent of pregnant and 34% of the postpartum women were resilient from depression, whereas 56% and 49% were resilient from posttraumatic stress disorder. Resilience was most likely among White women, older women, and women who had a partner. A greater experience of the storm, particularly injury/illness or danger, was associated with lower resilience. Experiencing damage because of the storm was associated with increased report of some perceived benefits. CONCLUSION: Many pregnant and postpartum women are resilient from the mental health consequences of disaster, and perceive benefits after a traumatic experience. Certain aspects of experiencing disaster reduce resilience, but may increase perceived benefit.

Source: http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2822707

Resource Description

Communication: M

resource focus on research or methods on how to communicate or frame issues on climate change; surveys of attitudes, knowledge, beliefs about climate change

A focus of content

Communication Audience: M

audience to whom the resource is directed

Public

Exposure: M

Climate Change and Human Health Literature Portal

weather or climate related pathway by which climate change affects health

Extreme Weather Event, Human Conflict/Displacement

Extreme Weather Event: Hurricanes/Cyclones

Geographic Feature: M

resource focuses on specific type of geography

Ocean/Coastal

Geographic Location: M

resource focuses on specific location

United States

Health Co-Benefit/Co-Harm (Adaption/Mitigation): ☐

specification of beneficial or harmful impacts to health resulting from efforts to reduce or cope with greenhouse gases

A focus of content

Health Impact: M

specification of health effect or disease related to climate change exposure

Injury, Mental Health/Stress

Mental Health Effect/Stress: Stress Disorder

Medical Community Engagement: M

resource focus on how the medical community discusses or acts to address health impacts of climate change

A focus of content

mitigation or adaptation strategy is a focus of resource

Adaptation

Population of Concern: A focus of content

Population of Concern: M

populations at particular risk or vulnerability to climate change impacts

Children, Low Socioeconomic Status, Pregnant Women, Racial/Ethnic Subgroup

Other Racial/Ethnic Subgroup: Not specified

Resource Type: M

format or standard characteristic of resource

Research Article

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Resilience: M

capacity of an individual, community, or institution to dynamically and effectively respond or adapt to shifting climate impact circumstances while continuing to function

A focus of content

Timescale: M

time period studied

Time Scale Unspecified

Vulnerability/Impact Assessment: M

resource focus on process of identifying, quantifying, and prioritizing vulnerabilities in a system

A focus of content